

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

Frumovitz et al.

Appl. No.

: 10/053,014

Filed

: October 16, 2001

For

VAGINAL SPECULUM AND

PROCEDURE

Examiner

: Bonderer, David A.

Group Art Unit

3732

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 24, 2003

(Date)

Jennifer Halves, Reg. No. 50,84

RESPONSE TO RESTRICTION REQUIREMENT AND PRELIMINARY AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Restriction Requirement in the Office Action mailed from the United States Patent and Trademark Office on June 5, 2003, Applicants hereby elect Group II, drawn to a method of using a speculum, for examination without traverse. Applicants have amended the claims as follows:

AUG 0 5 2003
TECHNOLOGY CENTER R3700

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55.00 OP

Customer No.: 20,995

Docket No.: AFRUM.00-A

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AMENDMENT / RESPONSE TRANSMITTAL

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Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Response to Restriction Requirement and Preliminary Amendment in 5 pages.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION								
FEE TYPE						FEE CODE	CALCULATION	TOTAL
Total Claims	16	-	21		0	2202 (\$ 9)	0 x 9 =	\$ 0
Independent Claims	. 2	-	4	=	0	2201 (\$ 42)	0 x 42 =	\$ 0
Multiple Claim						2203 (\$140)		\$ 0
1 Month Extension						2251 (\$ 55)		\$ 55
2 Month Extension						2252 (\$205)		\$
3 Month Extension						2253 (\$465)		\$
							TOTAL FEE DUE	\$ 55

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$55 is enclosed.
- (X) Return prepaid postcard.

(X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

lennifer Hayes

Registration No. 50,845

Agent of Record

Customer No. 20,995

(619) 235-8550

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